

PHYSICIAN'S ORDERS

Inmate Name: Green Tyne

Inmate Number: EP 4593

DOB: 12370

Institution: Alber

Drug Allergies:

Self-Medication Program Yes No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
9/20/01	#19	x-ray Rhad AP/LAT/Oblique two split 1638 Susan Martin, LPN
9/21/01	C	D/C Disperal - not taking → Janax 1mg po tid prn ? x60d
1400		Sinequan 50mg po hs
9/21/01	164 Martin	RTC in 8wks Dr. Linda - Shutk Angela Lindemuth, D.O.
1000/01		① hand Ap 1st elevation OOS → done - L Night
10am	19	By for box of small & tiny fig n m/act/palos ② Head.
		10pm 1100pm
1025/01	(1)	① sigmoid en irrgation 1/3 in full x30m apt
1350	(2)	② Saline gtt in ea Bx 5 d. DR. David Bashline
	(3)	③ Tolnaftate 1% Cr apply Bx 50d
1833/01	(4)	④ Mollin 600g i/p G 10m x 30 d) refills DR. DAVID BASHLINE
		10-28-01

PLEASE USE BALL POINT PEN ONLY D.O.

PHYSICIAN'S ORDERS

Inmate Name: Green, Tyrone

Inmate Number: EP 4593

DOB: 1-23-70

Institution: SCI-Albion

Drug Allergies: NKA

Self-Medication Program Yes No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
11/9/01 1000	C	<i>Clonazepam 1mg po tid prn } x 90d Sinequan 50mg po hs } RTC in 12 wks</i>
		<i>1300 1-21 Sandra Malena, RN, LPN, R.N.</i>
		<i>O Lindemuth DO Angela Lindemuth, D.O.</i>
11-28-01 1505	C	<i>EKG - not due from 7/01 order Mr. ALMs monthly → Monthly</i>
1-2-8-01		<i>M</i>
		<i>Medical Director 1/1/01 163</i>
3/11/02 1400	C	<i>Clonazepam 1mg po tid prn } x 90d Sinequan 50mg po hs } RTC in 12 wks</i>
		<i>O Lindemuth DO Angela Lindemuth, D.O.</i>
3/18/02 640	b	<i>Dihydralazine 1/2 grain q.d. once daily pm bedtime & 10 doses in stock-n-go Nurse give libidin tablets to PR</i>
		<i>Brenda Hale, RN, II</i>
		<i>Mar-31 510C 1731</i>

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PHYSICIAN'S ORDERS

Inmate Name: Green, Tyrone

Inmate Number: EP 4593

DOB: 1-23-70

Institution: SCI-Albion

Drug Allergies: NKDA

Self-Medication Program Yes NoDO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS

Date/ Military Time	Prob #	Prescription Details	Signatures
11/19/01 1000	C	<p>1. Xanax 1mg po tid (pm) } x 90d</p> <p>1. Sinequan 50mg po ls } RTC in 12 wks</p> <p>1300 Sandra Malena, RN (prn)</p>	<p><i>Angela Lindemuth, D.O.</i></p> <p><i>Angela Lindemuth, D.O.</i></p>
11-28-01 1505	C	<p>EKG - not due from 7/01 order</p> <p>MR RMs monthly → Monthly</p>	<p><i>Dr. Mark Baker, PA</i></p> <p><i>Medication Control</i></p>
11-28-01 1732			<p><i>M. Baker, PA</i></p>
2/1/02 1400	C	<p>Xanax 1mg po tid (pm) } x 90d</p> <p>Sinequan 50mg po ls } RTC in 12 wks</p>	<p><i>Angela Lindemuth, D.O.</i></p>
3/18/02 1640	b	<p>Dihydralazine 25mg oral daily pm horowitz 1/2 dose in stock mgly Morse</p> <p>give blood tests & etc</p> <p>Brenda Hale, RN II</p>	<p><i>Dr. Mark Baker, PA</i></p>

1731

FIVE POINT PEN ONLY

PHYSICIAN'S ORDERS

Inmate Name: Green, Tyrone

Inmate Number: EP 4593

DOB: 1-23-70

Institution: SCI Albion

NKDA
Drug Allergies:Self-Medication Program Yes No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
8/5/02		By VK 500 - 1 po Qm Xodex 400 full day in Dental Dept Mechanical soft diet x 30 days 8/5/02 - 9/5/02 - full for dental time X 28 days
1230		RALPH LUCAS, RN 8/3
		DR LESLIE GORDON, DDS
8/12/02 C 1230		Torays 1mg po tid pm } Vistaril 50mg po hs pm } x 90d DIC Sinequan RTC in 12 weeks
		Angela Lindemuth, D.O.
		TOM HICKEY, RN
8/12/02	1315L	Hickey
9/3/02 a 1025		Mechanical soft diet x 90 days 8/9/02 - 12/1/02 Moullin Removable Myler Board - delivered in Dental Dept signed Healthy Life Plan Receipt
9/3/02 1145		DR LESLIE GORDON, DDS
		PLEASE USE BALL POINT PEN ONLY

PHYSICIAN'S ORDERS

Inmate Name: Green, Tyrone

Inmate Number: EP 4593

DOB: 1-23-70

Institution: SLI Abita

NKDA

Drug Allergies:

Self-Medication Program Yes No

Date/ Military Time	Prob #	DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS
9/22/02	9	Tobnay 1mg po tid qpm [x] 90d <i>(10)</i> DR. DAVID BASHLINE D.O. <i>[Signature]</i>
9/27/02	1400	1400 1/8/02 BARBARA MONROE, RN
11/4/02	CX	Tanax 1mg po tid qpm } Vistaril 50mg po hs qpm } x 90d RTC in 12wks <i>Angela Lindemuth, D.O.</i>
11/10/02	1800	<i>Angela Lindemuth, D.O.</i> Elizabeth Barton, RN
12/1/02		Main Stomg po tid T food x 14 days <i>M.D. Medical Director</i>
12/5/02	19	1360
12/14/02		1360
12/20/02		1360
12/23/02	(19)	(1) Cardiac Diet - x 100 days (2) No work outside if temp $\geq 32^{\circ}$ C (99.6 $^{\circ}$ F) (3) micromax cream 2% qid - thin bid to gone fresh x 3 days <i>Teleo</i> (4) Corafate 1 gm po qid T food - <i>No aspirin please dispense</i> Main Stomg po qid T food - <i>both x 3 days with 2nd flx</i> topks = Corafate <i>labell takes to 1L</i>
12/23/02		JODI EBRIGHT, LPN <i>THE BALL POINT PEN ONLY</i>

PHYSICIAN'S ORDERS

Drug Allergies: NKA

Self-Medication Program Yes No

Inmate Name: Green, Tyrone

Inmate Number EP 4593

DOB: 1-23-70

Institution: SCD A/B/M

**DO NOT USE THIS SHEET
UNLESS A RED NUMBER SHOWS**

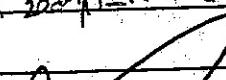
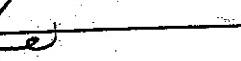
2/3/03 C Xanax 1mg po tid prn }
1400 Vistaril 50mg po hs prn } x 90d
RTC in Pwks

~~2/3/03 1930 AM~~
~~KOTTERWICH, RN~~

2003
LAM B Capnograph 30cc p qid fm discontinue x 14 days
615 C JOHN PURVIS, RN
X H 21/03/1930 DR MARK BAKER

1285 19 Expediton 10000 go Q10 3 x 3000 Drift
1715 Carapate 1900 go Q10 3 DR. DAVID BASHLINE D.C.
21-28-03
Susan Martin LPN

5-27-03 C (① Xanax 1mg po tid pm anxiety)) both x 3 days - No NGR - in psych eval
0944 ② Valium 5mg po HS pm anxiety)

Dr. Mark Baker 
Medical Director 
JAMES McDUFF, RN 5-27-03
130

PLEASE USE BALL POINT PEN ONLY

MEDICATION ADMINISTRATION RECORD

BOSWELL PHARMACY SERVICES

814-629-1397 • Fax: 814-629-7644

REPLACED	ITEM	TABLET	P
CHARGE	ITEM	PAPER	R
TOOK	ITEM	MOTOR	N
OUR	ITEMS	BALLY AS	
NEEDED	(WITH MOTORING)	X 50	

IBUPROFEN 650MG TABLET
1 TABLET = 650MG
ONE TABLET = 650MG
TWO TABLETS = 1300MG
THREE TABLETS = 1950MG
FOUR TABLETS = 2600MG
TAKE 1 TABLET BY MOUTH
AS NEEDED FOR PAIN X

3
P
T
T
H
F

11/16
S 100

300 **EDMONTON** **AB** **X GOD**

Signature _____ **Initial** _____ **Signature** _____

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Initial Signature
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Initial Signature

DATE OF BIRTH OR SOC. SEC. NO. 01/23/1570 ALLERGIES None

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ME AND NUMBER
JL- TYR0N-EP4581

FACILITY
SERIES

HOLME

HILDEBRAND

CHARTING FOR THROUGHS

MEDICATION ADMINISTRATION RECORD

BOSWELL PHARMACY SERVICES

814-629-1397 • Fax: 814-629-7644

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100
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Some lesson learned

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Initial Signature Initial Signature Initial Signature

DATE OF BIRTH OR SOC. SEC NO. ALLergies

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FACILITY

CHARTING FOR
TURNOVER

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MEDICATION ADMINISTRATION RECORD

BOSWELL PHARMACY SERVICES

814-629-1397 • Fax: 814-629-7644

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ALLERGIES NO KNOWN

NAME AND NUMBER

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